

FEBRUARY 2020 REPORT

All the three arms of our mission (MoM Medical Center, MoM Orphanages and MoM Christian Academy) are doing well by the grace and mercies of God. We believe you are doing fine too. We wish you a good time as you go through this edition of our report. We will be glad to have you join us in praise and prayers to the Lord.

MoM MEDICAL CENTER



As always, the month's update on our mission hospital is presented along the paths of the three main domains of the hospital's activities – General healthcare, Charity and the Gospel. We have the following few selected stories and relevant statistics:

GENERAL HEALTH CARE:

1. Patient with Multiple burns from explosion receives intervention. On Monday, the 24th of



February 2020, a 30-year-old man named Joseph was rushed to MoM Medical Center with multiple burns on his body. He was said to have been exposed to an explosion of hot gas trapped in a drum of heated engine oil while trying to open it. A combination of very high temperature and pressure shot at his body around the lower torso and right arm. He is lucky to be alive, and very grateful for it. Emergency care stabilized him and prepared him for definitive care which came along later. Mr. Joseph is doing much better

2. Combination of Diabetes Mellitus, Hypertension and Congestive Cardiac Failure in One Man.

This middle-aged man was brought to MoM Medical center unconscious. He had a vicious



combination of 3 chronic diseases. He had been receiving care at the country's highest hospital – the National Hospital Abuja but defaulted follow-up, and as a result, deteriorated terribly. Patients find it physically, financially and psychologically very difficult to handle diseases that require life-long treatment. They may begin well, but tend to tire out overtime if adequate support is lacking. Medical management of Diabetes Mellitus plus hypertension plus congestive cardiac failure is definitely associated with some treatment dilemma, and obviously requires multiple specialties. After an extensive review by one of our specialists, he was referred to a tertiary

medical center for further care. We earnestly pray that God will bring this patient of unconsciousness and out of this crisis as a whole.

3. **Mr. Igba has Been Discharged Home.** Mr. Igba has been in our reports for the past couple of months. Muscle biopsy result is out. It says biopsy features are those of myodegenerative lesion with moderate chronic inflammation. Tying this with clinical findings, the neurologist has made a final diagnosis of polymyositis. With this, our patient was discharged home on high dose steroids. He will be visiting the clinic as an out-patient from now on. More striking is that he says he feels stronger even before the commencement of high dose steroids. We are happy to hear that even though we can't say (for sure) that all that strength came from our medical efforts.

4. **MoM Medical Center Extension, Otutulu.** The following are some of the activities at our Otutulu health outpost for the month.

a. **Prematurity, Low Birth Weight, Diarrhea, fever, Dehydration and Maternal Death.**

Abdulrahman Musa was born with this truck load of problems. His mother died during his



birth. He was eventually brought to MoM Orphanage Otutulu for foster care. But due to these health problems, he had to first receive medical attention. He was so dehydrated that all the usual signs of dehydration were glaring, including a depressed anterior fontanelle, sunken eyes etc. Intravenous fluids, antibiotics, feeding, optimized temperatures and affection all deployed helped



to bring this premature baby back to health. He came into the world with a truck load of problems, but he does not necessarily have to go through it with them. May God change his story through Ministry of Mercy as He has done for so many others in the past in Jesus name.

- b. **Recurrence Of Diabetic Leg Ulcer.** Mr. Mohammed is a known diabetic for years. As one of the complications of poorly managed Diabetes mellitus, he developed a refractory left sided leg ulcer. All efforts to treat this was ineffective. As a result, the limb was amputated over a year ago. He had done well with prosthesis since that time until about 2 weeks ago when he reported a development of a wound on the amputation stump. This is not the kind of news doctors want to hear. There was enough worry over the delayed healing of the stump when the leg was freshly done in 2018. The eventual healing was a great relief. Now, receiving the news of wound recurrence does not come with the best of feelings. But as required, we will face it head-on and by God's grace, we will win.



General Healthcare Statistics

General

General out-patient department	171
Ward admissions	44
Surgical procedures	09
Total no. who received drugs	239

Total number of laboratory tests done	323
Number of transfusions	02

Preventive Medicine:

Immunizations (within the hospital)	
Number of children immunized	101
Number of doses received	197
Number of women immunized (tetanus toxoid)	22
Number of doses	22
Contraception.	
Women received contraceptives	01

CHARITY:

A lot of free medical services were given to several patients, some of whom could not have been able to afford it on their own. Most of these are maternal and child health cases. Some of these stories are narrated below.

1. **Severe Hypertension in Pregnancy/Labor.** 35-year-old in her 6th pregnancy, who was not registered for antenatal care came to us with a blood pressure reaching to the “sky”. This must have been possible because she didn’t attend antenatal clinic, where the hypertension could have been picked up and effectively controlled before the day of labor. The blood pressure was not just very high, it kept shooting higher. She came in with a blood pressure of 170/100mmHg but as labor progressed it escalated to 230/170mmHg despite control measures instituted. She was very lucky not have developed convulsions which usually result from levels of hypertension this high in pregnancy and labor.



The knee-jerk response in such a situation is to GET THE BABY OUT IMMEDIATELY, but definitely not by allowing labor to progress naturally. She was to be immediately wheeled into the operating room. But before that could happen, she brought forth her 3.8kg (7.4 lbs.) live baby girl. Everyone heaved a sigh of relief. But you won’t believe what happened soon after. Seeing that delivery was safe, the couple decided they wanted discharge, even when post-partum care and hypertension control was not yet completed. They signed against medical advice and left! We believe that the same mindset that kept her away from the antenatal clinic is still at play here. Or what should we think? Her delivery was safe, the obstetric service was free. What else does she want? These women need a lot of re-orientation to deliver them from the mindset that has kept them in medical darkness for centuries. Prayers and public health efforts are needed here.

2. Premature Labor and Baby. With an EDD (expected date of delivery) of March 22,



2020, no one would have expected to see Mrs. Daniel in the labor ward on February 18, 2020, but she showed up anyway. She was in premature labor. She was a registered antenatal clinic patient who had been attending clinic. But all that didn't prevent the premature labor. Before long, she was delivered of a live baby boy weighing only 2.1 kg (4.6 lbs.). He had some difficulty picking up initially but later did well. His sucking reflex was yet to be well developed, so he had to struggle with feeding for some time. But all those problems are gone now. With much medical support going on, we

believe he will pull through the prematurity period.

3. Uneventful Pregnancy, Labor and Delivery. Most deliveries in MoM medical center take



this form. We will just talk about Mrs. Andrew who is one of our registered antenatal patients at MoM Medical Center. This is her first pregnancy. She had everything go smoothly from antenatal days through labor and delivery. She labored for about 12 hours (5am to 5pm). She now has a live baby girl weighing 3.7kg.

4. Woman traveled from south-eastern Nigerian state to kogi state (north-central Nigeria)



to give birth to her baby at MoM Medical center to alleviate her cost. Her husband is a police officer serving in the south-east.

5. Four Cesarean Sections

- a. **Cesarean Section Due to Prolonged Labor.** Mrs. Isaac, a 19-year-old woman came to MoM



Medical Center in labor. This was her first pregnancy. She had not attended antenatal clinic sessions before the day of her labor. Labor was becoming longer than usual. Primigravids (“first timers”) are known to labor for longer durations than experienced mothers, but hers was getting longer than expected. A diagnosis of obstructed labor was made, and she had a cesarean section. She was delivered of a live baby girl weighing 2.9kg.

- b. Mrs. Blessing, a 22-year-old woman in her second pregnancy had a cesarean birth. She



already had a previous cesarean surgical scar from a previous birth at another hospital. She now has a live baby boy weighing 3.3kg.

- c. Mrs. Victoria was referred from Kogi State Specialist Hospital to the Federal Medical Center Lokoja for cesarean section due to transverse lie of her fetus. She was a 32-year-old woman in her 6th pregnancy. She was registered for antenatal care at the referring hospital, and had had 7 uneventful antenatal visits prior to this. But for logistics reasons she had to be referred to have her baby elsewhere. She decided to rather come to MoM Medical Center to have her baby. Her surgery was successful. She was delivered of a live baby boy weighing 3.3kg.

d. HIV + Obstructed Labor + Previous Cesarean Section Scar = Another Cesarean Section.



The woman with the above equation came to us in MoM Medical Center as an unregistered patient. She came to us already in labor. As part of the usual protocol, necessary tests were done, which revealed she had HIV infection. Labor failed to progress because of obstruction due to a large baby size. Her uterus had also been scarred by a previous cesarean surgery so her labor could not be pharmacologically augmented. She had to go through another c-section, extracting a 4.3 kg (9.5 lbs.) live baby girl. Both baby and mother were commenced on antiretroviral drugs to prevent maternal to child transmission of the retrovirus. They have since been discharged, to see them in subsequent follow-up visits.

Statistics on Charity

Antenatal care statistics		
Week	New patients	Patients on follow-up
Week 1	03	22
Week 2	03	14
Week 3	01	15
Week 4	02	09
Total	09	60
Grand Total		69
Other Free Consultation (Children below 1 year, orphans, pregnant women and indigents)		24
Number of Deliveries		
C-Sections		04
Normal Deliveries		07
Total Births		11
Number Who Received Drugs for Free (Children below 1 year, orphans, pregnant women and indigents)		88
Number Who Had Laboratory Tests for Free		57
Total Number of Free Surgical Procedures		06

THE GOSPEL:

We have the following stories of salvation for the month of February. The month has had more spiritual harvest than any of the previous months. We believe that God is at work.

a. Teenager Hands Her Lives Over to The Lord: Naive, unmarried 17-year-old Ruth (not her



real name) was admitted in MoM Medical Center on 11th of March on account of complications of illegal abortion. The abortion didn't go well. She still had retained products of conception which carried the risk of bleeding and infection. At MoM medical Center, she had a manual vacuum aspiration to clean up the uterus. After she was stabilized, the gospel of repentance and salvation was presented to her, and she accepted the Lord, confessing the lord Jesus Christ. To help with her spiritual growth, a copy of the Gideon's new testament Bible and a copy of Christian foundation book were presented

to her. She is undoubtedly a changed person.

- b. **Another Teenager and Her Mother Receive the Gospel.** Amina (not her real name) came on



follow up for a diagnosis of illegal abortion done a few weeks earlier. The gospel was presented to her and her mother. They received the message and decided to follow the Lord Jesus. They used to be muslims.

- c. **Two Relatives of a Patient Receive the Lord.** It all began when Mrs. Blessing (mentioned in the charity segment above) came into our care at MoMMC. She was accompanied by relatives, two of whom had not known the Lord. These were her mother-in-law and one other female relative.

After attending to the primary need that brought



them to the hospital, the gospel of salvation was presented to them. And gladly, they



both received it! It is interesting how God met their most important need when they came to meet the need of somebody else. They sowed good and reaped greater good. We pray that God help them grow in Him.

The gospel continues to be preached to many souls in different forms: one-on-one and in groups during our morning devotional sessions in the hospital. Your prayers continue to be needful. ***Ephesians 6.18-19.***

May we continue to be fruitful in every aspect as a Christian medical center by the grace and mercy of God.

Blessings,

Dr. Friday Odiba

On behalf of the MD,

MoM Medical Center Team



Dr. Wada A.S. Omale, Medical Director

MoM ORPHANAGES.

The two locations of MoM orphanage – Otutulu village and Lokoja – keep receiving and caring for more orphans and vulnerable people.

MoM Orphanage Otutulu Receives New Arrival

- **Abdulrahman Musa.** His story has been partly told in the medical section above. He was born through a cesarean in somewhere in faraway Lagos state, but mother never woke up from anesthesia. She died in the process. He was eventually brought to MoM Orphanage Otutulu for foster care. But due to these health problems, he had to first receive medical attention. He has significantly improved.

Four Children Reunited with Their Families of Birth.

- Ugbede Shuaibu was handed over to the Ministry of the women affairs and social development on February 21, 2020. She was born on June 22, 2011 and brought to the



orphanage on July 5, 2011 due to maternal health problems. She was one of a set of twins (the other was a boy). Their mother had deranged mental health. She had difficulty caring for her set of twins. Unfortunately, the other twin died. Only Ugbede came into our care. It's over 8 years now. She is due to be handed over to her people.

- **Gyton, Ojoma and Marvin.** These three siblings reflected in our report last month. The Kogi



State Ministry of Women Affairs and Social Development brought these children to MoM orphanage Lokoja on January 10, 2020. They were found roaming the town all by themselves. Their father (who had

divorced their mother much earlier) tried to raise them as a single parent but this was short-lived when he got involved in a ghastly car accident that has incapacitated him. As a result, these children were left to fend for themselves. They were found and brought to the orphanage for safety till things got better. They spent over a month in the orphanage and have now been handed back to their family through the government ministry that brought them.

- **New Water Works at MoM Orphanage Otutulu.** There are new water challenges in the orphanage community. This has necessitated the drilling of a new borehole in the premises to solve this problem.



- **Happy birthday to Our proprietor and Daddy, Uncle Daniel Edeh (And happy grandfather-hood):** On February 12, 2020, the children in the orphanage celebrated the birthday of their



sexagenarian proprietor and father, Uncle Daniel Edeh. Everyone calls him Daddy because of his parental roles and disposition to everyone. Since last year, our Daddy has often humorously talked about the need for the graduation of his name from Daddy to Grand-daddy. It's very common for a sexagenarian like him to have grandchildren anyway. Interestingly, as if God took note of that, on February 29, 2020 (few weeks after this birthday celebration) one of Uncle Edeh's biological daughters gave birth to a bouncy baby boy in the United States. This leap-year baby turns out

to be his first biological grandchild (Uncle Edeh does not like the term "biological children" though. He says there is no difference between the orphanage children and his own biological children. He argues that all children are biological anyway).



MoM FARMS.

Bountiful Harvest of Cashew Nuts. It's the cashew season again. This season comes with excitement for at least two reasons: one is the juicy, fleshy, tasty and satisfying fruit that comes from this plant.



Children particularly love this aspect of it. The other is the kidney-shaped seed, which is one of the most popular cash crops in the land. The adults particularly love this aspect of it. Therefore, both the old and young embrace this season but each for different reasons. MoM has a cashew farm which has begun to produce significantly. We are beginning to enjoy the harvest for the season.

Sincerely yours,

Monday Alidu.

MoM CHRISTIAN ACADEMY



1. **MoM Christian Academy Has a New Principal.** His name is Peter Ahmodu. He holds a BSc in Physics and an MSc in view. He has 10 years working experience. He resumed work at MoM on February 2, 2020.



2. **New Clinic Outlet for Our School.** MoM Christian Academy now has a school clinic located



within the school premises for immediate attention to mild illnesses. It is manned by Jemima Ekoh, a community health extension worker posted from the clinic at the orphanage. As the

situation might demand, sick children might need to be referred from here to the main clinic. This outlet is to receive more staff subsequently.

3. **The school computer room.** The school has a computer room for training of the children. The unit is coordinated by Clara Agbenyo.



4. The school bus conveys MoM children and physically challenged children from the orphanage to and fro their school.



Warm regards,

Sabo Yunusa

PRAYER REQUESTS

1. Give thanks to God for every healing, every salvation and every act of love in Ministry of Mercy.
2. Thank God for new staff that joined MoM. God is faithful in the supply of laborers when we ask him in faith.
3. Please pray for the Abdulrahman, the new orphan received into the orphanage in the month. May he grow up in wisdom and stature, and in favor with God and men.
4. Pray for all the children that were handed over back to their families of birth. Beyond handing them to their families, we hand them over to God Himself who by His providence brought these children our way.
5. Pray for every new convert that received the Lord at MoMMC in February. May they be fruit that will remain in the Lord. Remember previous converts too. May they continue to abide.
6. Pray for further spread of the gospel Jesus Christ among our patients at the MoM Medical Center. May we be effective hands of the Lord.
7. Pray for more hands to join the work in the Ministry of Mercy as the work continues to enlarge and prosper.
8. Please pray against the further spread of corona virus (COVID19) all over the world. Let God speak "peace, be still!) against this storm of deaths.

Thank you for your invaluable continuous partnership in prayers, thanksgiving and giving.

With Much Love from the MoM Team!

www.ministryofmercy.org

Ministry of Mercy..., *Love finds a way. 1 Cor. 13:7*

DONATIONS

You are welcome to help more of these kind of people get help however you can: you can help a pregnant woman access a doctor for antenatal consultation and care, or help her give birth in expert medical hands, or help a sick child see a doctor, or any of these under listed services, for free or at an affordable subsidy through your donations as God will enable you. All donations are welcome.

Maternal Care	Full Cost Waiver in Naira	Full Cost Waiver in USD Current exchange rate averages 362 naira per dollar, but may increase or decrease at any time.
Cesarean section	150,000 naira	\$416.00
Normal delivery	22,000 naira	\$61.00
Antenatal consultation	300 naira per visit	\$0.85
Routine antenatal drugs/medicines	Average 4,000 naira per pregnancy	Average \$11.00
Other Medical Services	Total in 2018: 2,300 naira	Average \$6.35
Pediatrics care - Kids below 1 year and all Orphans	Full Cost Waiver in Naira	Full Cost Waiver in USD
Clinic consultation	300 naira per visit	\$0.85
Ward Review	200 naira per review, average 2-7 reviews per hospital stay	\$0.55 per review
Lab tests	Average of 1500 naira per test, average 3-5 tests per patient	\$4.20
Drugs/medicines	600-5,000 naira per course	\$1.70-\$14.00
Other Medical Services	Total in 2018: 2,300 naira per patient	Average \$6.35
Clinic consultation	150 naira per visit	\$0.40

Ward review	100 naira per review, average 2-7 reviews per hospital stay	\$0.30
Lab tests	Average 750 naira per test, average 3-5 tests per patient	\$2.10
Drugs/medicines	1,500-2,500 naira per course	\$4.14-\$6.91
Other Medical Services	Total in 2018 150 naira	\$0.41
Widows and indigent patients	Cost Reduced According to the Patients' Needs	“Sliding Scale”
All Medical Services	Total in 2018 > 93,760 naira	>\$259.00